



Arkansas Department of Finance and Administration
Office of Intergovernmental Services
Victim Justice and Assistance Program

2005 SUBGRANT PROPOSAL
ANTICIPATED PROJECT COSTS

APPLICANT:

| POSITION NUMBER | BUDGET CATEGORIES | | TOTAL ANNUAL SALARY FROM ALL SOURCES | HOURLY RATE | TOTAL ASSIGNED WORK HOURS PER WEEK | | FEDERAL SHARE | STATUS OF POSITION UNDER THE FAIR LABOR STANDARDS ACT | TOTAL FEDERAL FUNDS REQUESTED |
|--------------------|---|-----------------|---|----------------|---------------------------------------|----------------------------|---------------|--|--|
| | SALARIES | | | | PROJECT AND NON-PROJECT | DEDICATED TO PROJECT | | | |
| 1 | | ASSIGNED SHIFT: | \$0.00 | \$0.0000 | 40.00 | Federal Payment: | N/A | NON-EXEMPT | : |
| | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | \$0.00 | | | | 0.00 | | | |
| | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | \$0.00 | | | | 0.00 | | | |
| | | \$0.00 | | | | BALANCE TO BE PAID | | | |
| | | | | | | Matching Contribution: | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | 0.00 | | no | |
| 2 | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT | : |
| | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | \$0.00 | | | | 0.00 | | | |
| | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | \$0.00 | | | | 0.00 | | | |
| | | \$0.00 | | | | BALANCE TO BE PAID | | | |
| | | | | | | Matching Contribution: | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | 0.00 | | YES | |
| 3 | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT | : |
| | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | \$0.00 | | | | 0.00 | | | |
| | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | \$0.00 | | | | 0.00 | | | |
| | | \$0.00 | | | | BALANCE TO BE PAID | | | |
| | | | | | | Matching Contribution: | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | 0.00 | | no | |
| 4 | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT | : |
| | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | \$0.00 | | | | 0.00 | | | |
| | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | \$0.00 | | | | 0.00 | | | |
| | | \$0.00 | | | | BALANCE TO BE PAID | | | |
| | | | | | | Matching Contribution: | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | 0.00 | | no | |
| 5 | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT | : |
| | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | \$0.00 | | | | 0.00 | | | |
| | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | \$0.00 | | | | 0.00 | | | |
| | | \$0.00 | | | | BALANCE TO BE PAID | | | |
| | | | | | | Matching Contribution: | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | 0.00 | | no | |

| POSITION NUMBER | BUDGET CATEGORIES | | | TOTAL ANNUAL SALARY FROM ALL SOURCES | HOURLY RATE | TOTAL ASSIGNED WORK HOURS PER WEEK | | PRORATED SHARE | STATUS OF POSITION UNDER THE FAIR LABOR STANDARDS ACT | TOTAL FEDERAL FUNDS REQUESTED | |
|--------------------|--|--|-----------------|---|----------------|---------------------------------------|----------------------------|----------------|---|--|--------------------|
| | SALARIES | | | | | PROJECT AND NON-PROJECT | DEDICATED TO PROJECT | | | | |
| 6 | NEW POSITION? | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT HAS THE STATUS BEEN FORMALLY CONFIRMED BY THE STATE LABOR DEPARTMENT? | : : \$0 | |
| | | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | | | | | \$0.00 | | | | 0.00 |
| | | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | | | | | \$0.00 | | | | 0.00 |
| | | | | | | | \$0.00 | | | | BALANCE TO BE PAID |
| | | | | | | | | | | | |
| NO | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | | 0.00 | | no | | |
| 7 | NEW POSITION? | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT HAS THE STATUS BEEN FORMALLY CONFIRMED BY THE STATE LABOR DEPARTMENT? | : : \$0 | |
| | | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | | | | | \$0.00 | | | | 0.00 |
| | | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | | | | | \$0.00 | | | | 0.00 |
| | | | | | | | \$0.00 | | | | BALANCE TO BE PAID |
| | | | | | | | | | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | | 0.00 | | no | | |
| 8 | NEW POSITION? | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT HAS THE STATUS BEEN FORMALLY CONFIRMED BY THE STATE LABOR DEPARTMENT? | : : \$0 | |
| | | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | | | | | \$0.00 | | | | 0.00 |
| | | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | | | | | \$0.00 | | | | 0.00 |
| | | | | | | | \$0.00 | | | | BALANCE TO BE PAID |
| | | | | | | | | | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | | 0.00 | | no | | |
| 9 | NEW POSITION? | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT HAS THE STATUS BEEN FORMALLY CONFIRMED BY THE STATE LABOR DEPARTMENT? | : : \$0 | |
| | | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | | | | | \$0.00 | | | | 0.00 |
| | | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | | | | | \$0.00 | | | | 0.00 |
| | | | | | | | \$0.00 | | | | BALANCE TO BE PAID |
| | | | | | | | | | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | | 0.00 | | no | | |
| 10 | NEW POSITION? | | ASSIGNED SHIFT: | \$0.00 | #DIV/0! | 0.00 | Federal Payment: | N/A | NON-EXEMPT HAS THE STATUS BEEN FORMALLY CONFIRMED BY THE STATE LABOR DEPARTMENT? | : : \$0 | |
| | | OTHER SOURCES THAT WILL CONTRIBUTE TO SALARY (FUNDING AMOUNTS and SOURCES): | | | | | \$0.00 | | | | 0.00 |
| | | WHAT PROJECT ASSIGNMENT(S) DOES / WILL THIS EMPLOYEE PERFORM? | | | | | \$0.00 | | | | 0.00 |
| | | | | | | | \$0.00 | | | | BALANCE TO BE PAID |
| | | | | | | | | | | | |
| | THIS POSITION IS CURRENTLY HELD BY: Vacant | | | | | | 0.00 | | no | | |
| | | | | TOTAL SALARIES REQUESTED: \$0.00 | | | | | | | |

| REQUESTED? | BUDGET CATEGORIES | | PROPOSED FEDERAL SALARY | RATE | PLEASE IDENTIFY THE SOURCE FROM WHICH THIS COSTS WAS SUPPORTED IN THE PREVIOUS YEAR. | TOTAL FEDERAL FUNDS REQUESTED |
|--------------------------------|-------------------|---|----------------------------|-------|---|--|
| | MANDATED BENEFITS | | | | | |
| | FICA | | | | | |
| | Position 1 | | \$0 | 7.65% | | 0 |
| | Position 2 | | \$0 | | | 0 |
| | Position 3 | | \$0 | | | 0 |
| | Position 4 | | \$0 | | | 0 |
| | Position 5 | | \$0 | | | 0 |
| | Position 6 | | \$0 | | | 0 |
| | Position 7 | | \$0 | | | 0 |
| | Position 8 | | \$0 | | | 0 |
| | Position 9 | | \$0 | | | 0 |
| | Position 10 | | \$0 | | | 0 |
| | | | | | TOTAL FICA REQUEST: \$0.00 | |
| Workers Compensation Insurance | | A | | 0.00% | | |
| | | B | | 0.00% | | |
| | Position 1 | A | \$0 | 0.00% | | 0 |
| | Position 2 | A | \$0 | | | 0 |
| | Position 3 | A | \$0 | | | 0 |
| | Position 4 | A | \$0 | | | 0 |
| | Position 5 | A | \$0 | | | 0 |
| | Position 6 | B | \$0 | | | 0 |
| | Position 7 | A | \$0 | | | 0 |
| | Position 8 | A | \$0 | | | 0 |
| | Position 9 | B | \$0 | | | 0 |
| | Position 10 | A | \$0 | | | 0 |
| | | | | | TOTAL WORKERS COMP REQUEST: \$0.00 | |
| STATE UNEMPLOYMENT INSURANCE | | | | 0.00% | | |
| | Position 1 | | \$0 | 0.00% | | 0 |
| | Position 2 | | \$0 | | | 0 |
| | Position 3 | | \$0 | | | 0 |
| | Position 4 | | \$0 | | | 0 |
| | Position 5 | | \$0 | | | 0 |
| | Position 6 | | \$0 | | | 0 |
| | Position 7 | | \$0 | | | 0 |
| | Position 8 | | \$0 | | | 0 |
| | Position 9 | | \$0 | | | 0 |
| | Position 10 | | \$0 | | | 0 |
| | | | | | TOTAL STATE UNEMPLOYMENT INSURANCE REQUEST: \$0.00 | |
| | | | | | TOTAL MANDATED BENEFITS: \$0.00 | |

| BUDGET CATEGORIES | | | | % of SALARY <i>if applicable</i> | RATE PER MONTH <i>if applicable</i> | PLEASE IDENTIFY THE SOURCE FROM WHICH THIS COSTS WAS SUPPORTED IN THE PREVIOUS YEAR. | TOTAL FEDERAL FUNDS REQUESTED |
|-------------------|-------------|---------------------|-----|---|--|--|--|
| EMPLOYER BENEFITS | | NUMBER OF MONTHS | | | | | |
| Health Insurance | | | | | \$0.00 | | |
| | Position 1 | 12 | | | | | 0 |
| | Position 2 | 12 | | | | | 0 |
| | Position 3 | 12 | | | | | 0 |
| | Position 4 | 12 | | | | | 0 |
| | Position 5 | 12 | | | | | 0 |
| | Position 6 | 12 | | | | | 0 |
| | Position 7 | 12 | | | | | 0 |
| | Position 8 | 12 | | | | | 0 |
| | Position 9 | 12 | | | | | 0 |
| | Position 10 | 12 | | | | | 0 |
| | | | | TOTAL HEALTH INSURANCE REQUEST: \$0.00 | | | |
| Life Insurance | | | | | \$0.00 | | |
| | Position 1 | 12 | | | | | 0 |
| | Position 2 | 12 | | | | | 0 |
| | Position 3 | 12 | | | | | 0 |
| | Position 4 | 12 | | | | | 0 |
| | Position 5 | 12 | | | | | 0 |
| | Position 6 | 12 | | | | | 0 |
| | Position 7 | 12 | | | | | 0 |
| | Position 8 | 12 | | | | | 0 |
| | Position 9 | 12 | | | | | 0 |
| | Position 10 | 12 | | | | | 0 |
| | | | | TOTAL LIFE INSURANCE REQUEST: \$0.00 | | | |
| Retirement | | | | 0.00% | | | |
| | Position 1 | | \$0 | | | | 0 |
| | Position 2 | | \$0 | | | | 0 |
| | Position 3 | | \$0 | | | | 0 |
| | Position 4 | | \$0 | | | | 0 |
| | Position 5 | | \$0 | | | | 0 |
| | Position 6 | | \$0 | | | | 0 |
| | Position 7 | | \$0 | | | | 0 |
| | Position 8 | | \$0 | | | | 0 |
| | Position 9 | | \$0 | | | | 0 |
| | Position 10 | | \$0 | | | | 0 |
| | | | | TOTAL RETIREMENT REQUEST: \$0.00 | | | |
| | | | | TOTAL EMPLOYER BENEFITS: \$0.00 | | | |

| MAINTENANCE & OPERATIONS | | | | | |
|--|-------------|------------------------------|--------------|--------|-----|
| Office Rent | | #DIV/0! | MONTHLY RATE | | |
| Square Footage for Entire Office: | | 0.00 | \$0.00 | | \$0 |
| | Position 1 | 0.00 | | | 0 |
| | Position 2 | 0.00 | | | 0 |
| | Position 3 | 0.00 | | | 0 |
| | Position 4 | 0.00 | | | 0 |
| | Position 5 | 0.00 | | | 0 |
| | Position 6 | 0.00 | | | 0 |
| | Position 7 | 0.00 | | | 0 |
| | Position 8 | 0.00 | | | 0 |
| | Position 9 | 0.00 | | | 0 |
| | Position 10 | 0.00 | | | 0 |
| Shelter Rent | | | MONTHLY RATE | | |
| Identify Structure(s) <small>(e.g., emergency shelter, transitional house)</small> DO NOT DISCLOSE SHELTER ADDRESS | | | | | \$0 |
| | | | | | 0 |
| | | | | | 0 |
| | | | | | 0 |
| | | | | | 0 |
| | | | | | 0 |
| | | | | | 0 |
| Telephone Costs | | TOTAL NUMBER OF OFFICE LINES | MONTHLY RATE | | |
| Office Telephone(s): Restricted to local and long distance service provided by project personnel to project clientele. | | 0.00 | \$0.00 | | \$0 |
| | Position 1 | | | 12 | 0 |
| | Position 2 | | | 12 | 0 |
| | Position 3 | | | 12 | 0 |
| | Position 4 | | | 12 | 0 |
| | Position 5 | | | 12 | 0 |
| | Position 6 | | | 12 | 0 |
| | Position 7 | | | 12 | 0 |
| | Position 8 | | | 12 | 0 |
| | Position 9 | | | 12 | 0 |
| | Position 10 | | | 12 | 0 |
| Pager(s): Restricted to pagers assigned to project personnel to ensure project client accessibility. If less than 100% on project, the total request will be prorated. | | | \$0.00 | | \$0 |
| | Position 1 | | | 12 | 0 |
| | Position 2 | | | 12 | 0 |
| | Position 3 | | | 12 | 0 |
| | Position 4 | | | 12 | 0 |
| | Position 5 | | | 12 | 0 |
| | Position 6 | | | 12 | 0 |
| | Position 7 | | | 12 | 0 |
| | Position 8 | | | 12 | 0 |
| | Position 9 | | | 12 | 0 |
| | Position 10 | | | 12 | 0 |
| TOTAL RENT REQUEST: | | | | \$0.00 | |

| | | | | | |
|--|--|--|----|---|-----|
| Cellular Telephone(s): Restricted to cell phones assigned to project personnel to ensure project client accessibility. If less than 100% on project, the total request will be prorated. | | \$0.00 | 12 | WHAT SOURCE PREVIOUSLY PAID FOR THIS POSITION'S CELL PHONE? | \$0 |
| Position 1 | | | 12 | | 0 |
| Position 2 | | | 12 | | 0 |
| Position 3 | | | 12 | | 0 |
| Position 4 | | | 12 | | 0 |
| Position 5 | | | 12 | | 0 |
| Position 6 | | | 12 | | 0 |
| Position 7 | | | 12 | | 0 |
| Position 8 | | | 12 | | 0 |
| Position 9 | | | 12 | | 0 |
| Position 10 | | | 12 | | 0 |
| FAX Line: In the course of providing direct services to crime victims (e.g., sending protective orders, referral information, job applications/resumes). Request will be prorated according to personnel percentage. | | \$0.00 | 12 | | 0 |
| Shelter Telephone: Restricted to a line that is dedicated for residents' use in arranging services and independence. Request will be prorated according to personnel percentage. | | \$0.00 | 12 | | 0 |
| Emergency Hotline / Toll-Free Line: Restricted to a line that is published and used as a means for victims to receive supportive crisis lay counseling 24 hours/day, 7 days/week. Request will be prorated according to personnel percentage. | | \$0.00 | 12 | | 0 |
| | | TOTAL TELEPHONE REQUEST: \$0.00 | | | |
| UTILITIES | | MONTHLY RATE | 12 | WHAT SOURCE PREVIOUSLY PAID FOR THIS UTILITY? | \$0 |
| Electricity: Identify Structure(s) (e.g., emergency shelter, transitional house) DO NOT DISCLOSE SHELTER ADDRESS | | | | | |
| Emergency Shelter | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| Gas: Identify Structure(s) (e.g., emergency shelter, transitional house) DO NOT DISCLOSE SHELTER ADDRESS | | | | | \$0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| Water: Identify Structure(s) (e.g., emergency shelter, transitional house) DO NOT DISCLOSE SHELTER ADDRESS | | | | | \$0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | \$0.00 | 12 | | 0 |
| | | TOTAL UTILITY REQUEST: \$0.00 | | | |

| | | | | | | |
|--|--|-------------------|---|--------------------------------|--|---------------|
| | Victim Transportation: Restricted to payment of mileage to a project employee using his/her personal automobile to transport a project client to receive services related to the recovery of the current crime incident. If less than 100% on project, the total request will be prorated. Note: Victim transportation entails actually transporting a victim. Driving to a destination to aid a victim is classified as Staff Transportation. | Anticipated Miles | General description of the type of transportation expected. | MILEAGE RATE | WHAT SOURCE PREVIOUSLY PAID THIS POSITION'S MILEAGE TO TRANSPORT A VICTIM? | |
| | | | | \$0.00 | | \$0 |
| | Position 1 | 0.00 | | | | 0 |
| | Position 2 | 0.00 | | | | 0 |
| | Position 3 | 0.00 | | | | 0 |
| | Position 4 | 0.00 | | | | 0 |
| | Position 5 | 0.00 | | | | 0 |
| | Position 6 | 0.00 | | | | 0 |
| | Position 7 | 0.00 | | | | 0 |
| | Position 8 | 0.00 | | | | 0 |
| | Position 9 | 0.00 | | | | 0 |
| | Position 10 | 0.00 | | | | 0 |
| | Staff Transportation: Restricted to payment of mileage to a project employee using his/her personal automobile to travel from the office to assist a project client in receiving services related to the recovery of the current crime incident. If less than 100% on project, the total request will be prorated. DOES NOT INCLUDE TRANSPORTATION TO AND FROM HOME AND WORK. Note: Staff transportation does not involve transporting a victim; this activities would be classified as Victim Transportation. | Anticipated Miles | General description of the type of transportation expected. | MILEAGE RATE | WHAT SOURCE PREVIOUSLY PAID THIS POSITION'S MILEAGE IN THE COURSE ON PROVIDING PROJECT-RELATED SERVICES OUTSIDE OF THE OFFICE? | \$0 |
| | | | | \$0.00 | | |
| | Position 1 | 0.00 | | | | 0 |
| | Position 2 | 0.00 | | | | 0 |
| | Position 3 | 0.00 | | | | 0 |
| | Position 4 | 0.00 | | | | 0 |
| | Position 5 | 0.00 | | | | 0 |
| | Position 6 | 0.00 | | | | 0 |
| | Position 7 | 0.00 | | | | 0 |
| | Position 8 | 0.00 | | | | 0 |
| | Position 9 | 0.00 | | | | 0 |
| | Position 10 | 0.00 | | | | 0 |
| | | | | TRANSPORTATION REQUEST: | | \$0.00 |

| | | | | | |
|--|--|---|--|--------|---|
| Printing | | WILL THE USE OF THIS PUBLICATION BE RESTRICTED TO THE SUBGRANT PROJECT? | | NO | |
| (1) Document Title: | | | | | |
| DESCRIBE THE PRODUCT THAT YOU ENVISION: (i.e., subject, format, paper and print quality, etc.). | | TOTAL ANTICIPATED COST: \$0.00 | | | 0 |
| | | Cost per Unit: #DIV/0! | | | |
| | | | | | |
| IS THIS A NEW PUBLICATION? | | IF THIS IS A RE-PRINT, WHAT SOURCE PREVIOUSLY PAID FOR PRINTING THE DOCUMENT? | | | |
| NUMBER OF COPIES PRINTED: 0 | | | | | |
| DESCRIBE THE INTENDED USE AND BENEFIT OF THE PRODUCT: (Please include the victim population that will be served by this product and how the material will reach the population[s] in terms of the proposed subgrant project.) | | | | | |
| | | | | | |
| PLEASE LIST ANY FEATURES THAT THE PRODUCT WILL HAVE TO ASSIST VICTIMS IN UNDERSERVED POPULATIONS: (i.e., language/culture barriers, physical challenges) | | | | | |
| (2) Document Title: | | WILL THE USE OF THIS PUBLICATION BE RESTRICTED TO THE SUBGRANT PROJECT? | | NO | |
| DESCRIBE THE PRODUCT THAT YOU ENVISION: (i.e., subject, format, paper and print quality, etc.). | | TOTAL ANTICIPATED COST: \$0.00 | | | 0 |
| | | Cost per Unit: #DIV/0! | | | |
| | | | | | |
| IS THIS A NEW PUBLICATION? YES | | IF THIS IS A RE-PRINT, WHAT SOURCE PREVIOUSLY PAID FOR PRINTING THE DOCUMENT? | | | |
| NUMBER OF COPIES PRINTED: 0 | | | | | |
| DESCRIBE THE INTENDED USE AND BENEFIT OF THE PRODUCT: (Please include the victim population that will be served by this product and how the material will reach the population[s] in terms of the proposed subgrant project.) | | | | | |
| | | | | | |
| PLEASE LIST ANY FEATURES THAT THE PRODUCT WILL HAVE TO ASSIST VICTIMS IN UNDERSERVED POPULATIONS: (i.e., language/culture barriers, physical challenges) | | | | | |
| | | TOTAL PRINTING REQUEST: | | \$0.00 | |

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|---------------------------------|
| TOTAL M & O REQUEST: |
|---------------------------------|

| |
|---------------|
| \$0.00 |
|---------------|

| PROFESSIONAL / CONTRACT SERVICES | | | |
|---|---|--|---|
| CONTRACT 1: DESCRIBE THE SCOPE OF THE CONTRACT: | DEFINE THE UNIT OF SERVICE THAT WILL BE PROVIDED: | | <i>For example, will you pay a set rate per support group session, protective order counsel, by the hour?</i> |
| | RATE: | \$0.00 | |
| | | | |
| IDENTIFY THE VICTIM POPULATION THAT WILL RECEIVE THE SERVICES AND THE PROCESS BY WHICH CLIENTS WILL BE REFERRED: | NUMBER OF ANTICIPATED UNITS: | 0 | 0 |
| PLEASE LIST ANY SPECIAL ACCOMMODATIONS THAT WILL BE MADE TO ASSIST VICTIMS IN UNDERSERVED POPULATIONS TO RECEIVE THIS SERVICE (i.e., language/culture barriers, physical challenges) | | | |
| CONTRACT 2: DESCRIBE THE SCOPE OF THE CONTRACT: | DEFINE THE UNIT OF SERVICE THAT WILL BE PROVIDED: | | <i>For example, will you pay a set rate per support group session, protective order counsel, by the hour?</i> |
| | RATE: | \$0.00 | |
| | | | |
| IDENTIFY THE VICTIM POPULATION THAT WILL RECEIVE THE SERVICES AND THE PROCESS BY WHICH CLIENTS WILL BE REFERRED: | NUMBER OF ANTICIPATED UNITS: | 0 | 0 |
| PLEASE LIST ANY SPECIAL ACCOMMODATIONS THAT WILL BE MADE TO ASSIST VICTIMS IN UNDERSERVED POPULATIONS TO RECEIVE THIS SERVICE (i.e., language/culture barriers, physical challenges) | | | |
| | | TOTAL PROFESSIONAL/CONTRACT SERVICES REQUEST: | \$0.00 |

| | | | | |
|---|--|--|--------|---------------|
| CAPITAL OUTLAY | | | | |
| ITEM 1: | | | | |
| DESCRIBE THE ITEM THAT YOU SEE AS NEEDED TO EFFECTIVELY IMPLEMENT THE PROPOSED PROJECT: | | WILL THE USE OF THIS ITEM BE RESTRICTED TO PROJECT STAFF | NO | |
| | | PRICE | \$0.00 | 0 |
| IF THE ITEM WILL ENABLE YOU TO ENHANCE SERVICES TO PROJECT CLIENTS, PLEASE DESCRIBE: | | | | |
| | | | | |
| ITEM 2: | | | | |
| DESCRIBE THE ITEM THAT YOU SEE AS NEEDED TO EFFECTIVELY IMPLEMENT THE PROPOSED PROJECT: | | WILL THE USE OF THIS ITEM BE RESTRICTED TO PROJECT STAFF | NO | |
| | | PRICE | \$0.00 | 0 |
| IF THE ITEM WILL ENABLE YOU TO ENHANCE SERVICES TO PROJECT CLIENTS, PLEASE DESCRIBE: | | | | |
| | | | | |
| | | CAPITAL OUTLAY REQUEST: | | \$0.00 |

Please provide any notes or comments that you believe would be helpful to the VJA staff in its review of your proposal.

ORGANIZATIONAL INFORMATION

(NEEDED FOR SOME CALCULATIONS)

If your personnel request is supported in full, how many positions will your organization employ between October 1, 2005, and September 30, 2006?
(federal and non-federal)

0.00

% of Staff
Proposed for
Federal Funding

Prorated Number of Employees Requested for 2005 Federal Support:

0.00

#DIV/0!

For each proposed position, describe how you arrived at the salary that you are requesting. For example, does your organization periodically perform job audits that correspond with a pay scale? Do you have a system that gives credit for education and/or experience?

2005 ANTICIPATED PROJECT COSTS BUDGET CATEGORY REQUEST TOTALS

SALARIES \$0

MANDATED BENEFITS \$0

EMPLOYER BENEFITS \$0

TOTAL PERSONNEL= \$0 #DIV/0! of Request

MAINTENANCE AND OPERATIONS \$0

PROFESSIONAL/CONTRACT SERVICES \$0

CAPITAL OUTLAY \$0

TOTAL REQUEST: \$0

TOTAL REQUEST.

\$0